

ATTORNEY DOCKET NO. 100200533-1

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

Intelligent Document Sh	ne invention entitl	ed:	the subject matter	which is claimed and	iginal, first I for which	
the specification of wh		reto unless th	e following box is a	hecked:		
•					ion	
() was filed on		_ as US Applic	cation No. or PC I II	nternational Applicat	ion	
Number	and	d was amended	d on	(if applicable).		
I hereby state that I hincluding the claims, a disclose all information Foreign Application(s) and/or	s amended by an which is material	y amendment(to patentabilit	(s) referred to abo	ve. I acknowledge t	ecification, the duty to	
Hereby claim foreign priorit inventor(s) certificate listed t affling date before that of th	below and have also ic	dentified below an	ry foreign application fo	any foreign application(s r patent or inventor(s) cer) for patent or tificate having	
COUNTRY	APPLICA?	TION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER	35 U.S.C. 119	
III COMMI				YES: N	O:	
322 6022 1. 2				YES: N	D:	
Provisional Application						
Provisional Application I hereby claim the benefit upglow:	nder Title 35, United	States Code Secti	ion 119(e) of any Unite	d States provisional appli	cation(s) listed	
i i	APPLICATION	NUMBER	FILING DATE			
Ti.						
S. Priority Claim						
application and the national	or PCT international fi	ling date of this a	tion 1.56(a) which occurred between the filing date of the prior oplication: STATUS (patented/pending/abandoned)			
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POWER OF ATTORNEY: As a named inventor, I he business in the Patent and T	reby appoint the follo	owing attorney(s) sected therewith:		secute this application a	nd transact all	
As a named inventor, I he	Trademark Office conn	nected therewith:	and/or agent(s) to pro	secute this application a	nd transact all	
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Inventor's Signature

Date

DECLARATION AND POWER ATTORNEY FOR PATENT APPLICATION (continued)

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Residence:	Route 1, Box 121 Marsing, ID	83639	
Post Office Address:	Same as Residence		
Myentor's Signature		Date	
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Full Name of # 4 joint inventor:	:		Citizenship:
Residence:			
Post Office Address:			
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Full Name of # 5 joint inventor	·:		Citizenship:
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Full Name of # 6 joint invento	1.		Citizenship:
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Post Office Address:			
Inventor's Signature		Date	
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Full Name of # 7 joint invento	۱ ۲ :		Citizenship:
	or:		
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 8 joint invento	or:		Citizenship:
Residence:			
Post Office Address:			
1 03. Office Muufess.			
Inventor's Signature		Date	